

PROCEDURE

PREPARATION AND CONTROL OF RMRS DOCUMENTS

QA-05.01

Revision 0

Date Effective: 02/19/97

APPROVED FOR INTERIM USE:

Sr. Vice President, Administration

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1.0 PURPOSE

This document provides direction for the preparation, revision, and issuance of RMRS policies, directives, manuals, procedures, instructions, and job-aids. RMRS documents are intended to:

- · Easy to use
- Easy to change and revise
- Written to the skill of the user
- Free of unnecessary requirements

The process control implemented by this procedure is depicted in Appendix 1, Document Process Flow Diagram.

This procedure implements portions of DOE Order 5700.6C, Quality Assurance; 10 CFR 830.120, Quality Assurance Requirements; 1-MAN-001-SDRM, Site Documents Requirement Manual; and Sections 6.1.4, 6.4, 6.5, and 6.5.2 of the RMRS Quality Assurance Program Description (RMRS-QAPD-001).

2. SCOPE

This document applies to RMRS personnel involved in the preparation/use of RMRS documents for quality affecting activities or processes. This procedure only applies to documents being developed for use within RMRS or RMRS subcontracted services. Documents with Site-applicable requirements and direction shall be prepared, revised, and issued in accordance with the provisions of 1-MAN-001-SDRM, Site Documents Requirement Manual. It is at the responsible manager's discretion to determine the type of document needed. The extent of detail and prescriptiveness in RMRS documents is contingent on:

- The operations' or activities' relative importance to safety, safeguards, and security
- The magnitude of any hazard involved in conducting the operation or activity
- The life cycle stage of a facility or activity
- The programmatic mission of a facility or activity
- Particular characteristics of a facility or activity
- Any other relevant factors, specifically to include the competence of the individuals performing the activity

This procedure does not apply to correspondence, or documents developed by organizations outside of RMRS. This procedure does not apply to plans, or reports and other documents not identified above which are developed, revised, reviewed, approved, and issued at the manager's discretion, unless other controls apply.

3. **DEFINITIONS**

Note: Definitions provided herein are specific to this procedure. All other unique terms may be located in the Quality Assurance Glossary of Terms, found in the Site Quality Assurance Manual, or in the SDRM Glossary of Terms.

<u>Directive</u>. RMRS directives are used as methods of passing on programmatic or administrative direction, where other documents are not in existence to control the practices involved.

<u>Document History File (DHF).</u> Documents that evidence the development, review, concurrence, approval, revision and control of a document. The history file includes the drafts submitted for review, correspondence documenting reviews, justification for revision(s) to the document, any verification and validation documentation, the completed parallel review comment resolution documentation, Form 06.01-A3, Controlled Document Release, an electronic copy of the document, and the Document Development Checklist.

<u>Document with Site Applicable Requirements</u>. Site applicability includes programs or requirements that RFETS employees must follow, regardless of company affiliation. The programs may be owned by sub-contractors but are approved by K-H. (Approved Site-applicable documents, developed by RMRS, are forwarded to RMRS Document Control for submittal to Site Document Control.)

General Comments. Comments designated by a reviewer based on the reviewer's knowledge or area of expertise and identified by a (G) on the Review Comment Sheet. General comments reflect the reviewer's opinion and do not indicate a violation of technical or administrative Orders, laws, etc. General comments will be considered and incorporated as deemed appropriate by the author of the document. General comments do not require concurrence from the comment originator.

<u>Instruction</u>. RMRS instructions provide direction to perform a simple task or activity that, if performed incorrectly, will have minimal consequences.

<u>Job-Aid</u>. RMRS job-aids provide useful information as a reminder for the performance of a task. For example, it could be drawings, tags, graphs, or charts. Job aids should <u>not</u> be used in place of a procedure, when a procedure is warranted; should <u>not</u> conflict with or supersede approved procedural instructions; and should <u>not</u> cover subject matter that would address safety envelopes, radioactive and hazardous materials, maintenance, operating procedures, test procedures, surveillance procedures, analytical procedures, emergency responses, VSS equipment, OSRs, or TSRs. Job-aids are developed at the discretion of the responsible manager and are not included in the RMRS Document Control process.

Mandatory Comments. Comments identified by an (M) on the Review Comment Sheet. Valid mandatory comments must be dispositioned and concurred with by the reviewer's organization. Comments listed by the reviewer as mandatory that do not meet the following criteria may be downgraded to general (G). Mandatory comments by a reviewer must include the following supporting documentation:

- Technical information that is necessary to meet the mission needs of the reviewer's organization
- Requirements source documents shall be identified (for example, Occupational Safety and Health Administration [OSHA] 23.10, Policy Manual, or program documents)
- Justification for mandatory comment (for example, Justification: technical inaccuracy)

Mandatory comments can be downgraded to General if the above requirements are <u>not</u> met. The Responsible Manager has final decision on comment resolution.

<u>Manual</u>. RMRS manuals define the necessary and sufficient programmatic requirements needed to implement a program.

<u>Policy</u>. RMRS policies are written core value statements signed by from the RMRS President to all employees to express senior management's expectations for conducting business at RFETS.

Procedure. RMRS procedures are a written documents that set forth the responsibilities and methodologies for performing a process with complex steps and/or a moderate to high potential risk, hazard, and/or consequence. A procedure may contain written instructions to conduct operations, evolutions, tests, or to respond to abnormal or emergency situations, or annunciators or alarms for alarm panels. Administrative procedures describe the actions and responsibilities for performing activities that establish management and programmatic controls for RMRS. Technical procedures describe the actions and responsibilities for performing activities that include, but are not limited to, production, operation, surveillance of equipment and facilities, and maintenance.

Responsible Manager (RM). This is a functional description used to represent the manager who is responsible for developing documents.

<u>Verification and Validation (V&V)</u>. A process, whereby a technical procedure is tested to ensure sufficient detail exists to support adequate, consistent, and effective completion of the task described in the procedure.

4. RESPONSIBILITIES

4.1 Responsible Manager (includes designees or document originators)

- Appoint knowledgeable personnel to develop documents for activities and processes.
- Ensure appointed personnel are aware of and understand the requirements of this procedure.
- Ensure that affected organizations are included in the review of documents, including ESH&Q, and any applicable Site safety committees or boards.
- Approve documents developed within their organization.

4.3 Functional Managers

- Are accountable for the safety and quality of activities performed in accordance with documents.
- Participate in the review of documents.
- Ensure personnel attend training as required.

4.4 Compliance

- Assist responsible managers in developing, revising, reviewing, and controlling documents.
- Prior to approval, review documents, as requested, to ensure that applicable laws regulations and orders have been incorporated.

4.5 ESH&Q

- Prior to approval, review all documents to ensure that appropriate health, safety, and quality controls have been incorporated.
- Provide training for documents as requested by the RM.

4.6 RMRS Document Control

- Assign, log and track RMRS document numbers (controlled and uncontrolled).
- Issue RMRS controlled documents.
- Maintain the master document and DHF for the current revision.
- Issue and transmit the master document and DHF of previous revisions to the RMRS Records Center.

4.6 Personnel (Document Users)

- Are responsible for the quality and safety of activities they perform.
- Use documents as prescribed, and inform management of any deficiencies identified within a document.
- Propose new documents, or changes, to management for consideration.
- Fulfill role as document originator and/or perform activities identified in this document as assigned by management.

5. INSTRUCTIONS

The process control implemented by this procedure is depicted in Appendix 1, Document Process Flow Diagram.

5.1 Define Applicability

- [1] The RM determines if the document to be developed has Site-applicability. If the document is Site-applicable, the RM develops or revises the document in accordance with the provisions of the SDRM.
- [2] The RM submits approved Site applicable documents to RMRS Document Control, including completed forms required by 1-77000-DC-001, Document Control Program.

5.2 Establish Document Type

[1] The RM, using Table 1, determines the type of document to be produced.

5.3 Develop Document

- 5.3.1 Initiate Document History File
 - [1] The RM shall initiate the Document Development Checklist from RMRS procedure Document Control Program, DC-01. The checklist will be maintained by the RM or designee for the duration of the document development and review, until such time that the document is transmitted with the Document History File (DHF) to Document Control.
- 5.3.2 Develop Draft/Revision
 - [1] The RM shall ensure that the provisions of this procedure are met and that all applicable laws, regulations, orders, and requirements are addressed appropriately. Documents must meet the records acceptance criteria defined in 1-V41-RM-001, Records Management Guidance for Records Sources (Section 6.3)
 - [2] The RM should consider contacting the appropriate support organization with expertise in the area of concern for assistance in preparation of documents (i.e., Safety, Quality Assurance, Nuclear Safety, Environmental Restoration, etc.).
 - [3] The RM shall ensure that a unique identification number is assigned to each document. Numbers are assigned by RMRS Document Control in accordance with the provisions of DC-01, Document Control Program.
 - 5.3.2.1 Policies, Directives, and Job-Aids
 - [1] The RM shall format RMRS policies, directives, and job-aids in accordance with Appendix 2.
 - [2] The RM should utilize the definition section of this procedure for determining the scope and content of policies, directives, and job-aids. The SDRM may also be considered for determining appropriate content and scope.
 - [3] When developing job-aids, the RM should consider the guidance provided in 1-31000-COOP-010, Control of Operator Aids.

5.3.2.2 Manuals, Procedures, and Instructions

[1] The RM shall format RMRS manuals, procedures, and instructions in accordance with Appendix 3.

- [2] The RM should utilize the definition section of this procedure for determining the scope and content of manuals, procedures, and instructions. The SDRM may also be considered for determining appropriate content and scope.
- [3] The RM shall ensure that documents identify the forms and documents resulting from the implementation of the document as a Quality Assurance (QA), a Non-QA record, and/or a CERCLA Administrative Record.

Guidance on establishing the categories are provided in 1-V41-RM-001, Records Management Guidance for Records Sources; 2-G18-ER-ADM-17.01, Records Capture and Transmittal; 2-N96-ER-ADM-17.09, Records Identification, Preliminary Preparation, and Creation. Retention duration, location and final disposition requirements must also be described in the records section of the procedure.

5.4 Review

[1] The originator should have the document reviewed by peers prior to submitting to the manager for approval. or before distributing for review by other groups within RMRS. All reviews should be documented and include comments, comment resolution, and comment resolution concurrence.

5.4.1 Identification

- [1] The RM shall identify RMRS organizations affected by the document. Organizations affected include those who use the document, supply a material, service, or data in accordance with the document, or receive a service, product, or data in accordance with the document.
- [2] All documents, including changes and revisions will be submitted to the ESH&Q and Program Compliance organization for review and comment resolution prior to approval, or field implementation of changes.
- [3] All documents developed to implement site-applicable requirements must be reviewed and concurred with by the cognizant K-H Oversight organization.

3.4.2 Assemble Package

[1] The RM shall assemble a review package consisting of the document, in draft form; a review and comment sheet, and related continuation page (Ref: SDRM Appendix 7), and correspondence transmitting the document for review. The transmittal correspondence shall include, as a minimum, distribution to affected organizations, a description of the change or drivers initiating a need for the document, a due date for reviewers to submit comments, a statement concerning disposition of comments received after the due date, and a definition of comment types (Ref.: Appendix 4).

5.4.3 Transmit for Review

[1] The RM shall transmit the review package to the affected organizations, and, when possible. allow two weeks for mail delivery, review and return of comments.

5.4.4 Review and Comment

[1] The affected organization will distribute the document as deemed appropriate to provide for review and comment. To prevent extraneous comment resolution, when possible, reviews should be limited to essential individuals involved in the process or activity covered by the document. When possible, comments should not be provided on the borders or margins of the document. Comments received on borders or margins will be considered as general comments. To ensure comments are considered, every effort shall be made to meet the comment due date. Comments received after the due date and not resolved shall not preclude reviewing organizations from concurring with the document. Late comments will be resolved during the next scheduled revision.

5.5 Comment Resolution

5.5.1 Comment Disposition/Concurrence

[1] The RM will incorporate comments as appropriate, and comment review forms will be retained in the DHF. Concurrence will be obtained for the resolution of mandatory comments. Concurrence with mandatory comments will be evidenced by the comment originator's initials where indicated on the review and comment form.

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Table 1 RMRS DOCUMENT HIERARCHY

Document	Purpose	Applicability	Review/ Concurrence	Approval
Policy	Convey Senior management's expectations for the Site regarding values, principles, philosophies, goals, standards, or accepted practices.	RMRS employees and subcontractors	RMRS impacted Sr. Vice Presidents	RMRS President
Directive	Provide direction and/or responsibilities for controlling programmatic practices or activities within a department or group.	RMRS employees and subcontractors	RMRS impacted Vice Presidents and Managers	RMRS Sr. Vice President responsible for the program
Manual	Incorporate the necessary and sufficient programmatic requirements needed to define and implement that program (not how to implement).	RMRS employees and subcontractors	RMRS impacted Vice Presidents and Managers	RMRS Sr. Vice President responsible for the associated task or activity
Procedure (Typically placed in a binder)	Provide detailed steps and necessary information for performing a test or activity in a consistent and safe manner. Should be used while conducting activity.	Any person who performs or has responsibilities within the associated task or activity.	Impacted RMRS Vice Presidents & impacted subcontractors or designee	Company wide or cross-cutting organizations: RMRS President/ Sr. Vice President/ Vice President responsible for the associated task or activity Bldg./Program Specific: Bldg./Program Manager_
Instruction* (Controlled but not auditable)	Provide instructions to perform a simple task or activity that, if performed incorrectly, will have minimal consequences. Should be used while conducting activity.	Any person needing the assistance of the instruction to perform the task or activity.	Impacted RMRS Vice Presidents & impacted subcontractors or designee	RMRS Manager/Supervisor/ Forman responsible for the associated task or activity.
Job Aid* (Not controlled by Document Control)	Provide visual information as a reminder for the performance of a task (e.g., drawings, tags, graphs, or charts.)	Any person desiring the assistance of the job aid to perform the task or activity	RMRS impacted user's Manager for the activity or task	At the discretion of the RMRS Manager responsible for the activity or task.

With the exception of Job Aids, the above documents shall be controlled under RMRS Document Control in Building 116, X5430.

^{*}Not part of the Authorization Basis.

5.6 <u>Verification and Validation</u>

5.6.1 Verification

- [1] The RM shall conduct and document a verification review for new and revised technical procedures. Documented reviews shall be retained in the DHF. The following items should be considered, as a minimum:
- Operational Safety Analysis (OSA)/Operational Safety Requirements (OSR)/TSR/OSHA applicability
- Ability to complete the task as written
- Accurate directions for form completion
- Complete, correct, and available references
- Complete and accurate DHF package

A verification checklist in Appendix 8, of the SDRM may be used for verification review documentation.

5.6.2 Validation

[1] For new or revised technical procedures, the RM shall conduct and document a validation review prior-to-approval. The RM assigns a validator to perform a simulated or actual walkdown of the document to determine whether the document can be correctly, safely, and effectively performed. A Validation Checklist (identified in Appendix 11, of the SDRM) may be used for documenting the review. The documented review shall be maintained in the DHF.

Screening/Safety Reviews

[1] For all new, changed, or revised procedures, the RM shall obtain an SES/USQD process review in accordance with 1-C10-NSM-04.03, Safety Evaluation Screen, and 1-C11-NSM-04.05, Unreviewed Safety Question Determination. Technical procedures may be exempted from the SES/USQD process if they meet the requirements of 1-C10-NSM-04.03, Appendix 1, Categorical Exclusion from the SES/USQD Review Process. Documented evidence of screening activities or exemption determination shall be retained in the DHF

[2] The RM shall initiate an Independent Safety Review (ISR) (formerly known as Operations Review Committee [ORC] review) for all new, changed, or revised procedures procedures. ISRs shall be performed in accordance with 1-52000-ADM-02.01, Operations Review Requirements. Documented evidence of ISRs will be retained in the DHF

Supplemental Review

- [1] The RM should consider having documents extensively revised or changed as a result of internal or external reviews, V&V reviews, safety screens, or ISRs resubmitted for review and comment.
- [2] Prior to issue, the RM will consider the document for classification in accordance with the Site Security Manual.

5.8 Approval

- [1] After resolution of comments, appropriate concurrence, and any required safety review comment resolution, the RM shall obtain a review for classification, as required, and approve the document. Approval authority for documents is depicted in Table 1. Approval documentation, including correspondence, shall be retained in the DHF.
- [2] Documents become effective on the date indicated on the first page. The RM and organization managers should agree on the effective date to allow for necessary training prior to the effective date.

5.9 <u>Training/Issuance/Document History File</u>

[1] Training for effective implementation of RMRS documents will be considered on a case-by-case basis by the RM and other managers affected by the document. Where base competency requires training, it should be coordinated with the RMRS training organization. The RM is shall participate in defining training, certification, and qualification requirements for the document generated.

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- [2] After approval of the document, the RM shall assemble the master document and DHF (ref.: Section 3 definition), and formally transmit the package to RMRS Document Control.
- [3] With the exception of Job-Aids, all active documents must have a controlled distribution.
- [4] Controlled distributions will be facilitated by RMRS Document Control using transmittal receipt acknowledgment forms. Controlled distribution should be extended to the Site Standards Management organization.
- [5] RMRS Document Control will retain the master document and DHF in a one-hour fire rated cabinet.

5.10 Changes, Revisions, Periodic Reviews, and Cancellation

- [1] Changes to documents, including field changes, are facilitated by the RM. Changes differ from revisions in that changes do not require re-issue of the document, and may be handwritten, typed or the RM may make changes by obtaining the electronic copy from Document Control, and editing the document to
- the date and RM initials are placed vertically header is required.

 [2] The RM determines if review of the change is required (Ref. 5.4.1[2], and 5.7), and obtains needed distribution. Review, comment disposition, and concurrence related to document changes, including field changes, will be documented and retained for the DHF.
 - beginning the next scheduled work day after the change was made.
 - [4] The RM should initiate a document revision when changes have made the document difficult to perform, or when the process being controlled by the document has changed.
 - [5] The RM begins the revision by initiating a Document Development Checklist, obtaining the electronic version from Document Control, making revisions as necessary, and following the process defined from Section 5.4 through 5.9. Revisions require the same level of review as the original issue.
 - [6] The RM should initiate a periodic review to ensure that the document accurately and adequately satisfies current technical and administrative requirements and guidelines. Frequency should be based on the following schedule:
 - 1 year -- Emergency Preparedness procedures
 - 3 years -- Procedures that potentially affect vital safety systems
 - 4 years -- all other documents
 - [7] The RM initiates cancellation of documents by formally notifying RMRS Document Control. Document Control facilitates cancellation through transmittal receipt form, and retains the canceled document and DHF in accordance with records management requirements.

RECORDS 6.

The following documents generated during the performance of this procedure must be controlled as follows:

Document	Record Type	Disposition
Document History File	QA, Non- Permanent	RM Transmits to RMRS Records Center, where retained for 12 months after procedure is superseded or canceled. RMRS Records Center staff then formally transmits to the Site Records Management organization for long term storage in accordance with the provisions of 1-77000-RM-001, Records Management Guidance for Records Sources.
Draft Versions of Document as Submitted for Review, and Peer Reviews	Non-QA	RM retains until procedure is approved, at which time the Draft versions may be discarded.

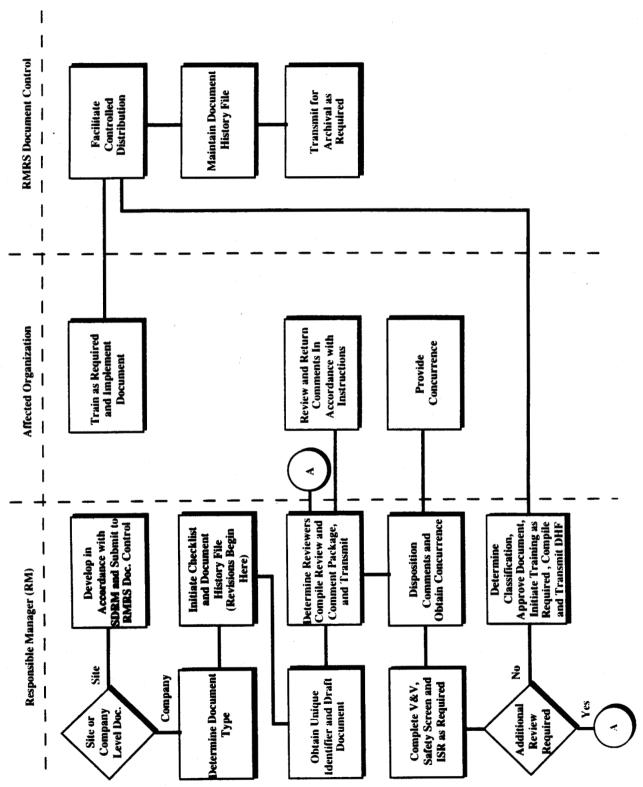
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7.	REFERENCES
7.1	RMRS-QAPD-001, RMRS, Quality Assurance Program Description
7.2	1-P04-CMCAP-16.00, Commitments Management and Corrective Action Process
7.3	1-V41-RM-001, Records Management Guidance for Records Sources
7.4	1-52000-ADM-02.01, Operations Review Requirements
7.5	1-31000-COOP-010, Control of Operator Aids
7.6	1-C10-NSM-04.03, Safety Evaluation Screen
7.7	1-C11-NSM-04.05, Unreviewed Safety Question Determination
7.8	RFETS Site Quality Assurance Manual
7.9	Site Security Manual
7.10	PROCEDURE DC-06.01, RMRS Document Control Program
7.11	DOE Order 5700.6C, Quality Assurance
7.12	10 CFR 830.120, Quality Assurance Requirements
7.13	1-77000-DC-001, Document Control Program
7.14	2-G18-ER-ADM-17.01, Records Capture and Transmittal

2-N96-ER-ADM-17.09, Records Identification, Preliminary Preparation, and Creation

APPENDIX 1
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DOCUMENT DEVELOPMENT AND CONTROL PROCESS FLOW DIAGRAM



APPENDIX 2

Page 1 of 1

RMRS POLICIES, DIRECTIVES, JOB-AIDS FORMAT



TYPE of DOC.

[Title]

[Unique Identifier No.]
[Draft/Revision]
Date Effective: XX/XX/XX

APPROVED:

Page X of XX

[Responsible Manager, Organization]

1. PURPOSE

[State the purpose of the document. Where possible, reference should be made to the driver (requirements, laws, orders, etc.) leading to the development of the document.]

2. SCOPE

[State the scope of the document, including where it applies and where the procedure does not apply.]

3. [Policy, Directive, or Job-Aid]

Policies should meet the following guidance:

- · Provide a broad statement of core values, principles, philosophies, goals, standards, or accepted practices
- Define senior management's expectations
- Apply to all RMRS and subcontractor personnel
- Do not contain instructions
- Do not conflict with RFETS or other company policies

Directives should meet the following guidance:

- May be developed for controlling programmatic practices
- Should not be developed for the purpose of controlling work
- Should not override any RFETS policy or any other controlled document
- Should not be used to temporarily correct another controlled document
- · Should be short in nature with the intent clearly stated to promote understanding and to avoid confusion

Job-Aids should meet the following guidance:

- Job aids may be an appendix to an approved document
- Stand-alone job aids may be schedules, checklists, flow charts, diagrams, and maps
- Low-level administrative procedures may be written as job aids

Job aids shall not:

- Be used in place of a procedure, where a procedure is warranted
- Conflict or supersede approved procedural instructions
- Cover subject matter that would address safety envelopes, radioactive materials, etc.

APPENDIX 3

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EXAMPLE RMRS MANUAL, PROCEDURE, INSTRUCTION FORMAT



[Responsible Manager, Organization]

TYPE of DOC.

Title	[Unique Identifier No.]
	[Draft/Revision]
	Date Effective: XX/XX/XX
APPROVED:	Page X of XX

1. PURPOSE

[State the purpose of the document. Where possible, reference should be made to the driver (requirements, laws, orders, etc.) leading to the development of the document.]

2. SCOPE

[State the scope of the document, including where it applies and where the procedure does not apply.]

Other sections may be included as deemed appropriate, including, but not limited to: responsibilities, requirements, definitions, etc.

3. [Instruction, Direction, and/or Requirements, as appropriate]

[Write the instructions to perform the activity in a complete and concise manner. Care must be taken to assure all requirements are addressed.]

[Instructions may be in a sequentially numbered format, presented as bullets, described in text paragraphs, or any combination of these. Instructions may also incorporate a reference such as a letter, procedure, or checklist, by reference. However, if the reference is not a controlled document that is readily available to individuals using the document for the performance of an assigned task, a copy of the reference must be included as an appendix.]

4. RECORDS

[Documents must define all forms and other documents generated during the performance of the described activity, and indicate which of these forms and documents constitute records, which records are quality or non-quality records, and where such records will be retained.]

Document [Describe the document by title and number as applicable.]

[Describe the type of record in accordance with 1-77000-RM-001; 2-G18-ER-ADM-17.01, Records Capture and Transmittal; 2-N96-ER-ADM-17.09, Records Identification, Preliminary Preparation, and Creation; QA, NonQA, or AR]

Record Type

Disposition

[Describe retention period, location and final disposition.]

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EXAMPLE DOCUMENT REVIEW TRANSMITTAL CORRESPONDENCE



INTEROFFICE MEMORANDUM

DATE:

[Date]

TO:

[Distribution]

FROM:

[Name, Organization, Location, Extension]

SUBJECT:

REVIEW FOR APPROVAL [Document Title and Number] - [Number]

Action: Review and Comment By [Date]

The subject document (attached) is transmitted for your review and comment.

To facilitate expeditious issuance of the document, please review and provide any comments on the attached form(s) by [Date]. Comments received after this date will be considered in the next revision of the document. If you do not respond to the review, the process will consider that you have concurred with the document's content and have no comments. Please, consider the distinction between "general" and "mandatory" comments, as depicted on the Review and Comment Form. Mandatory comments should be reserved for instances where your comment highlights a departure from a regulation, requirement, etc.

I extend my appreciation in advance for your participation in the review, and if clarification or specific information is needed, please contact me at the extension provided above.

[Author Initials/Typist Initials]

Attachments: As Stated

Distribution

[Names and Affiliation as Required] RMRS Records Center

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RMRS ADMINISTRATIVE PROCEDURES

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06 DC-06.01	Document Control Program		0	02/17/97
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